

DIVISION I

CA07-92

September 12, 2007

DELOIS SMITH

APPELLANT

v.

JEFFERSON COMPREHENSIVE
CARE SYSTEM, INC. AND
COMMERCE & INDUS. INS. CO.

APPELLEES

AN APPEAL FROM THE ARKANSAS
WORKERS' COMPENSATION
COMMISSION
[F312995]

REVERSED AND REMANDED

This appeal is from the Arkansas Workers' Compensation Commission's denial of appellant Delois Smith's claim for benefits for neck and lower back injuries. We remand this case to the Commission for more specific findings.

Smith was working as a nurse for appellee Jefferson Comprehensive Care on October 13, 2003, when she sat in a chair that collapsed causing her to fall to the floor and strike her neck on a nearby table. Smith has a history of back problems dating back to 1989 and was treated for back injuries from 1989 to December 2002. Smith's first medical treatment after her October 13, 2003 fall was on November 11, 2003. The treatment record from that day states: "back pain - hurting about 1 week Pt states back went out when she got out of tub this am." On November 14, 2003, Smith was diagnosed with cervical and lumbar strain. She

was later diagnosed with “straightening of the cervical lordosis, probably due to muscle spasm” and disc bulges at C4-5, C5-6 and C6-7.

Smith filed a claim for benefits alleging that she suffered compensable injuries to her neck and lower back. Although Jefferson immediately disputed Smith’s claim for benefits relating to her neck injury, Jefferson initially did not controvert Smith’s claim for benefits relating to her back injury. It was not until July 28, 2005, that Jefferson controverted Smith’s back injury claim.

The administrative law judge found that Smith proved a compensable neck injury; that she was entitled to temporary-total disability benefits from October 13, 2003, through May 24, 2004, for her neck injury; and that she was entitled to all medical treatment reasonably necessary to treat her neck injury and her lower back injury. The ALJ’s decision was reversed by the full Commission which found that Smith failed to prove a compensable neck injury and that she failed to prove entitlement to additional medical benefits for her lower back injury. The Commission held that Jefferson was not obligated to pay any benefits for Smith’s back after July 28, 2005, the date of controversion. This appeal followed.

In workers’ compensation cases, we review the evidence and all reasonable inferences deducible therefrom in the light most favorable to the Commission’s decision and we affirm the decision if it is supported by substantial evidence. *Long v. Wal-Mart Stores, Inc.*, 98 Ark. App. 70, ___ S.W.3d ___ (2007). Substantial evidence is relevant evidence that a reasonable mind might accept as adequate to support a conclusion. *Allen Canning Co. v. Woodruff*, 92 Ark. App. 237, 212 S.W.3d 25 (2005).

Smith was required to prove that she sustained a compensable injury. *See Crawford v. Single Source Transp.*, 87 Ark. App. 216, 189 S.W.3d 507 (2004). An injury is compensable if it was caused by an accident arising out of and in the course of employment. *See Ark. Code Ann. § 11-9-102(4)(A)(i)* (Supp. 2005). The claimant must prove that she has an injury by introducing medical evidence supported by objective findings. Ark. Code Ann. § 11-9-102(4)(D). Objective findings are those findings that cannot come under the voluntary control of the claimant. *Long, supra*. The claimant must then prove a causal relationship between the injury and her employment. *Searcy Indus. Laundry, Inc. v. Ferren*, 82 Ark. App. 69, 110 S.W.3d 306 (2003). The claimant, however, does not have to present medical evidence to prove the causal relationship. *Id.*

The evidence-weighting and fact-finding functions are held by the Commission and we will affirm the Commission if its decision is supported by substantial evidence. This court, however, relies on the Commission to clearly articulate its findings of fact because we do not review the Commission's decisions de novo. *Sonic Drive-In v. Wade*, 36 Ark. App. 4, 6, 816 S.W.2d 889, 891 (1991). When the Commission fails to make specific findings on an issue, it is appropriate to reverse and remand the case for the Commission to make such findings. *Id.*

We remand this case to the Commission because we are unclear as to its rationale for denying Smith's claim for benefits relating to her neck injury. It is unclear whether the Commission denied Smith's claim after weighing the evidence and determining that she failed to prove her injury by medical evidence supported by objective findings or whether

the claim was denied because Smith failed to prove the causal relationship between her neck injury and her employment. The Commission is therefore instructed to clearly articulate its reasons for denying Smith's claims. We remand all remaining issues to the Commission so that this case is not decided piecemeal on appeal. *Sonic Drive-In, supra*.

Reversed and remanded.

PITTMAN, C.J. and HART, J., agree.